

within six months of entering custody, and then every six months thereafter for the life of the case. The CC serves as Mississippi's six month periodic administrative review. The CC also serves as Mississippi's family team conferencing model to continuously engage the family and children in the planning process by focusing on achieving timely permanency. The CC is also intended to enhance and strengthen the standard FTM casework process.

Quality Assurance

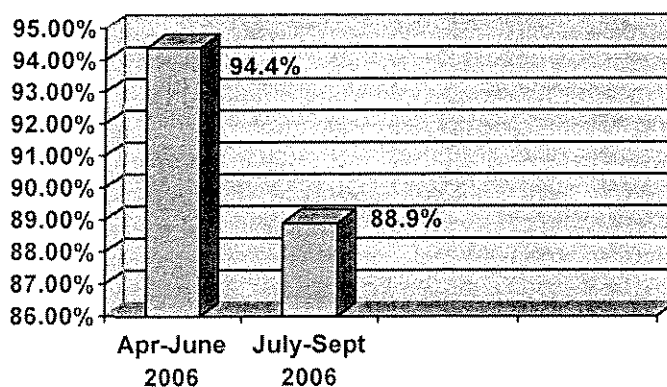
The quality assurance methods being used to track the implementation of the revised policy and practice to improve timeliness of investigations includes the monthly monitoring of the MACWIS Timeliness of Investigations Report and data. In addition, the custody cases are continuously reviewed (monthly) by the foster care reviewers as part of the CC every six months.

Coastal Recovery Plan

As part of Mississippi's Coastal Recovery Plan, MDHS has contracted with Social Worker p.r.n. to provide temporary workers for the counties directly impacted by Hurricane Katrina. These temporary workers will be used to assist the counties with cleaning up the backlog of cases. To date, a total of six temporary workers have been hired and have completed training. These workers have been assigned to the following counties: Jackson County (one worker), Harrison County (one worker), Forrest County (three workers), and Pearl River County (one worker).

Appropriate Permanency Plans (PIP Item 7)

Among the primary issues concerning the Foster Care Review Program is the appropriateness of permanency plans and the timeliness of their achievement. In the timeframe April-June 2006 the appropriateness of permanent plans based on case information was 94.4%. For the timeframe July-September 2006 it was 88.9%.



A review of the sample for April through June indicates a significant number of adoption cases. The next quarter's sampling was more varied which resulted in a percentage closer to the average for the past year. One reason these percentages are not better may be the cases where the documentation does not match the stated permanent plan or the county is working on one plan while another is the official stated plan. Additionally, some counties are required to work on plans set by the court, even though the county has

requested a more appropriate plan. The Foster Care Review Program will monitor this issue closely on an every-case basis beginning October 16, 2006, and report monthly to determine if there is a downward trend for this item that needs to be addressed with field staff.

Safety Outcome 2

Children are Safely Maintained in their Homes When Possible and Appropriate.

This particular outcome raised concerns that some children are not being sufficiently protected from risk of harm while in their own homes due to the insufficiency or lack of protective and in-home services.

Family Preservation

As noted in the CFSR Final Report and through interviews with stakeholders, the Family Preservation Program, which was done in-house, was clearly identified as a strength for DFCS. Based on stakeholder comments the main concern was that the supply of this type of service did not meet the demand. Available funding for expansion of the program was an issue, so the decision was made to contract with a private provider to continue the Family Preservation Program. A new RFP has been written and is going through the approval process. It is estimated that the new RFP will be issued and advertised by October 31, 2006, with November 30, 2006 as the deadline for submissions. The contract date with the new provider is anticipated to run from February 1, 2007 through September 30, 2007.

Family Centered Practice

The concept of FCP has been trained statewide and implemented (statewide training was completed in April 2006). A key component of FCP is FTM, which is required for all cases within 30 days to engage the families in the decision-making process and to develop the initial ISP. FTM is the responsibility of the caseworker as part of everyday practice to engage and involve the family in the decision-making process. It is anticipated that by improving family engagement in the decision making process as early possible, referrals to family preservation will be improved and the usage of in-home services to families to protect children in-home will increase.

Quality Assurance

An overarching strategy for improving the utilization and quality of in-home services will be the implementation of supervisory reviews of in-home cases on a quarterly basis. ASWS will review one in-home case per worker quarterly with the caseworkers to identify and assess the quality of case practice related to in-home cases and the services provided to protect children in-home and prevent removals when possible.

Regional Action Plans

All Regions have completed individual County Self Assessments to determine strengths and areas needing improvement for in-home services to protect children in-home and prevent removal. If the counties within a region identify areas needing improvement to protect children in-home and prevent removal as a safety priority, strategies will be

developed and included in the RAP relating to safety. Each Regional Action Plan must be submitted to the DFCS Division Director for final review and approval. After SO approval, the region will be required to implement and monitor progress on completing action steps and progress toward established goals. The ASWS and County will report progress monthly to the RD, who in turn will report quarterly to the SO.

All Regions have completed individual County Self Assessments to determine strengths and areas needing improvement related to risk of harm. If the counties within a region identify areas needing improvement to reduce risk of harm, such as safety and risk assessments, initial case planning, or FTM, then safety strategies will be developed and included in the RAP to improve practice.

Permanency Outcome 1

Children Have Permanency and Stability in Their Living Situations

The CFSR Final Report found that MDHS is not consistent in making diligent efforts to (1) establish appropriate goals in a timely manner; (2) achieve permanency for children (through adoption, reunification, permanent placement with relatives) in a timely manner; or (3) ensure that older children in long-term foster care receive appropriate services to assist them in making the transition from foster care to independent living.

Family Centered Practice

The overarching strategy to improve FCP through FTM and CC impacts the stability of placements. A FTM should be held around any major changes within the case such as placement decisions, placement moves and placement disruptions. By including the family and children in the FTM regarding placement decisions, more appropriate placements could be made. In addition, by matching the needs of the family and child with the appropriate placement type more placement stability would be created. The family centered enhanced CC being held every six months creates another opportunity to engage the family, children, foster parents or other placement providers as active team members in reviewing placement issues and permanency goals. The enhanced CC provides an opportunity to engage the foster parents and community providers as team members to improve placement stability while working toward permanency goals for children in their case.

FTM and CC strategies are being utilized as a strategy to improve timely reunification or permanency. FTM is helping caseworkers engage the family in decision-making and case planning to achieve more timely permanency through reunification, relative placements, or adoption. Holding FTM around major changes in the case, such as changes in the permanency goal would allow for more timely decisions for reunification or concurrent plans. The CC provides a forum for the staff and family team to review and make decisions related to reunification and other permanent options for the child.

Regional Action Plans

All Regions have completed individual County Self Assessments to determine strengths and areas needing improvement related to the stability of foster care placements. If

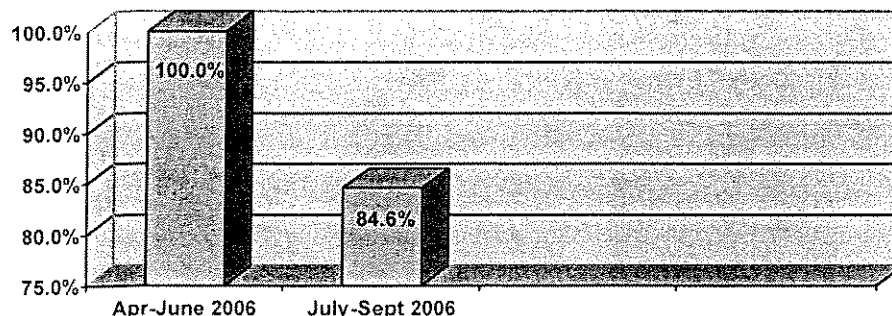
counties identify stable placements as an area needing improvement and a permanency priority, strategies will developed and included in the RAP. Each Regional Action Plan must be submitted to the DFCS Division Director for final review and approval. After SO approval, the region will be required to implement and monitor progress on completing action steps and progress toward established goals. The ASWS and County will report progress monthly to the RD, who in turn will report quarterly to the SO.

Quality Assurance

The overarching strategies for quality assurance that will impact placement stability include FCR and the monitoring of the MACWIS Placement Stability Reports. The FCR revised case review instrument targets indicators for placement stability and the quality of practice related to placement decisions. The FCR case review also tracks the CC to ensure that family team conferences are being held to review cases including foster parents and community providers at least every six months. MACWIS generates a Placement Stability Report which is one of the monthly reports used by RDs and ASWS to monitor placement activity.

Emancipation and Formalized Long Term Foster Care (PIP Item 10)

For older foster children whose plans were either emancipation or formalized long term foster care, 100.0% had more appropriate plans considered and ruled out for April through June 2006; however, that number fell to 84.6% for July through September.



The first sample was 8 but the latter sample was 13 and for 2 of those, other plans had not been ruled out. A primary problem may be the failure of counties to secure regional director approval. In one of these 2 cases from the 84.6% of the July–September sample, the judge ordered long term foster care on a 12 year old.

Permanency Outcome 2

The Continuity of Family Relationships and Connections is Preserved for Children

The CFSR findings indicated that MDHS did not make concerted efforts to ensure that children in foster care are placed, when appropriate, in close proximity to their parents and communities of origin. Also, MDHS was not consistent in its efforts to (1) place siblings together; (2) establish frequent visitation between children in foster care and their parents and siblings; (3) preserve connections for children in foster care; (4) seek relatives as potential placement resources; and (5) promote or maintain a strong, emotionally-supportive relationship between children in foster care and their parents. The

permanency and well-being of Native American children in foster care was also noted as an area of concern.

Family Centered Practice

The practice of FTM and CC creates opportunities to engage the family, foster families and other supports in planning efforts to improve frequency and accessibility of family visitation.

To ensure preservation of family connections and characteristics for children in foster care, policy and practice revisions include guidance to insure compliance and support of federal ICWA and MEPA mandates and requirements. The practice of FTM and CC also help to reinforce and support preserving family connections and characteristics.

The FCP, FTM and CC training address early and diligent search for maternal and paternal relatives and the engagement and utilization of relatives as placement resources.

The practice of FTM and CC creates opportunities to engage the family, foster families and other supports in planning efforts to improve the relationship of the child in care with parents and the frequency and accessibility of family visitation.

Regional Action Plans

All regions have completed individual County Self Assessments to determine strengths and areas needing improvement for placement in close proximity by evaluating practice and availability of placement options within a county. If the counties within a region identify placement in close proximity as a practice area needing improvement and as a permanency priority, strategies to improve placement practice will be addressed in the RAP.

All regions have completed individual County Self Assessments to determine strengths and areas needing improvement for sibling placements by evaluating practice and availability of placement options within a county. If the counties within a region identify placement in close proximity as a practice area needing improvement and as a permanency priority, strategies to improve placement practice will be addressed in the RAP.

All regions have completed individual County Self Assessments to determine strengths and areas needing improvement for parent and sibling visitation with the child in foster care by evaluating actual practice within a county. If the counties within a region identify family visitation while in foster care as a practice area needing improvement and as a permanency priority, strategies to improve family visitation will be included in the RAP.

All regions have completed individual County Self Assessments to determine strengths and areas needing improvement for preserving family connections and characteristics for the children in foster care by evaluating actual practice within a county. If the counties within a region identify preserving family connections or characteristics as a practice area

needing improvement and as a permanency priority, strategies to improve preserving family connections will be developed as part of the RAP.

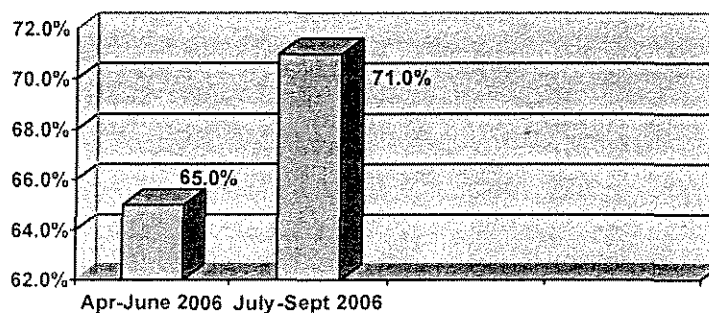
The RAPs will include strategies to improve practice for supporting relative placements and caregivers if the County Self Assessment process identifies this particular area as one needing improvement and is considered to be a priority for achieving timely permanency.

Quality Assurance

The Supervisory case review process will encompass the reviewing of in-home and custody cases to assess practice related to relative placements and supports. Foster Care Case Review also evaluates practice related to relative placements.

Proximity: Placements More Than 50 Miles (PIP Item 11)

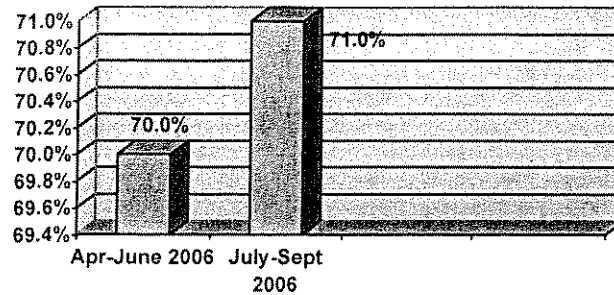
Proximity to the child's original home is a major factor in maintaining the relationship to facilitate reunification. The April-June 2006 percentage of foster children within 50 miles of their original home was 65.0%; the July-September percentage was 71.0%, an improvement over the annual average for July 2005 to June 2006 in which the average was 68.0%.



The Family Centered Practice training emphasized the necessity of assisting children to remain connected to their parents through regular visitation, most easily achieved when the children and the parents do not live at a greater distance apart than 50 miles, which can accommodate adjoining counties. Monitoring this through the regular foster care review process indicates that children placed outside the 50 miles radius are placed for reasons that assist in achieving the permanency goal for the children. In some cases the children are in therapeutic placement or are placed outside that 50 mile radius for a relative placement expected to become permanent.

Sibling Separation (PIP Item 12)

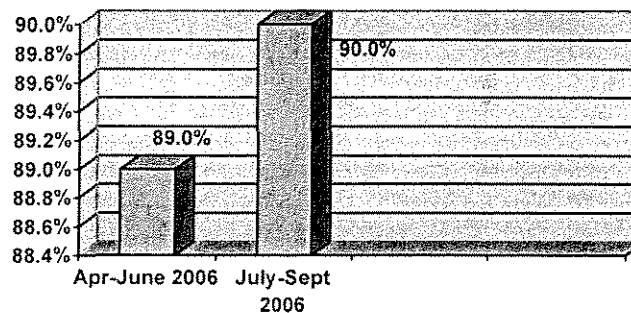
Another primary issue is maintaining sibling groups together in placement unless there are documented necessary reasons for separate placements. For the April-June 2006 quarter, 70.0% of the siblings in custody were placed with one or more siblings. For July-September, the percentage is 71.0%, a slight increase probably due to the Family Centered training as well as the monitoring case-by-case through the Foster Care Review Program. During the April-June quarter, of the children who are placed separately from



all their siblings, there was clear evidence 85.0% of those children had to be separated to meet their needs to achieve the goals or in some cases to protect the other siblings. For the July-September quarter, for 75.0% of the children separated from their siblings in foster care there was clear evidence the separation was necessary. The annual average was 67.0% for June 2005 to July 2006. This appears to show improvement.

Maintaining Connections (PIP Item 14)

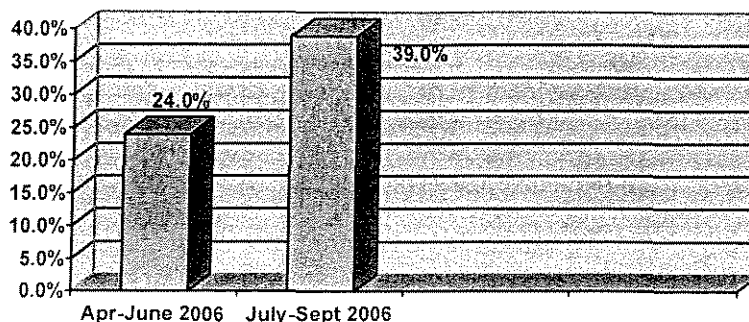
Agency efforts to maintain primary connections and characteristics were 89.0% in April through June 2006, and for July through September were 90.0%.



In addition to that 1.0% increase, there is also a slight increase in the counties' compliance with the ICWA requirements as well as in relative placements, family team meetings, efforts to keep the children closer to their homes and to maintain sibling and family contact. Again, the Family Centered Practice training appears to have provided impetus to the counties for extra efforts and more awareness regarding the families.

Relative Placements (PIP Item 15)

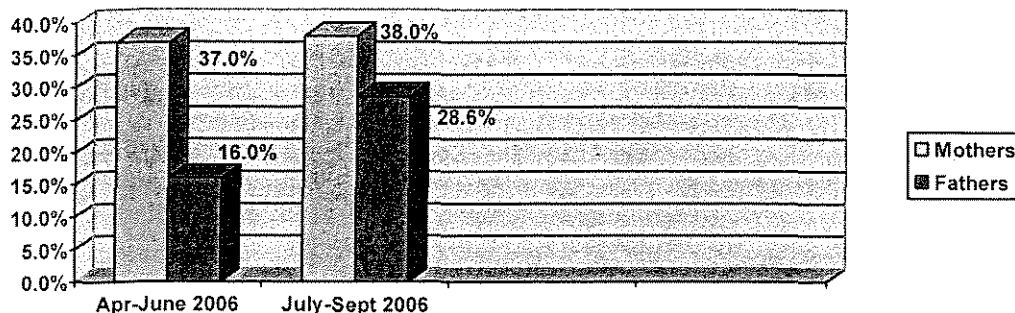
Relative placements for the period April through June 2006 was 24.0%; for July through September, 39.0% of the children were placed with relatives.



The annual percentage for July 2005 through June 2006 was 28.0% of children placed with relatives. In April through June 2006, of the children NOT placed with relatives, efforts appear to have been made to locate and secure maternal relative placement in 94.0% of those cases. For the July through September 2006 quarter, efforts appear to have been made to locate and secure maternal relative placements was 94.0%. Of the children not placed with relatives, efforts were made in 88.0% of the cases for April through June to locate and secure paternal relatives; for July through September the percentage for paternal relatives was 85.0%. It should be noted that not all foster children have an identified father. There is a significant increase in relative placements which appears to be attributed to the increased emphasis from the Family Centered Practice training on securing relative resources and involvement during the course of Family Team Meetings.

Visitation With Parents (PIP Item 16)

Regarding monthly visitation with the mother, the April through June 2006 percentage was 37.0% with a one percent rise for the July through September percentage to 38.0%. Visitation monthly with the father increased from 16.0% for April through June 2006 to 28.6% for July through September.



The increased visitation for fathers may be attributable to the Family Centered Practice training that emphasized the inclusion of fathers and paternal relatives. One note of clarification needs to be made: the reporting of visitation with parents is across the board and not just for children whose permanent plan is reunification with a parent. Some parents' whereabouts are unknown and the child's plan is not reunification.

Well-Being 1

Families have Enhanced Capacity to Provide for their Children's Needs

The CFSR findings for this outcome indicated that MDHS is not consistent in (1) meeting the service needs of children, parents, and foster parents; (2) involving children and parents in the case planning process; and (3) establishing face-to-face contact with children and parents with sufficient frequency to ensure children's safety and well-being.

Family Centered Practice

The FCP, FTM and CC training addressed the assessed needs and services for families and children to improve well-being outcomes.

The FCP, FTM and CC training addressed the child and family engagement in case planning to improve well-being outcomes.

Quality Assurance

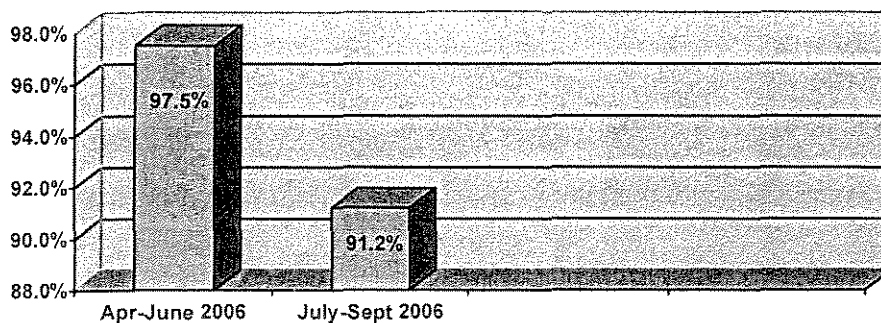
The supervisory case review will assess the practice of engaging family and children/youth in FTM to develop the initial ISP within 30 days from case assignment. Foster Care Case Review has the added responsibility of assessing the practice of actively engaging parents and children in case planning through the monthly random sample case review process.

Regional Action Plans

All regions have completed individual County Self Assessments to determine strengths and areas needing improvement for engaging the child and family in case planning by evaluating actual practice within a county. If the counties within a region identify engaging the child or family in case planning as a practice area needing improvement and as a permanency priority, strategies will be developed to improve practice as part of the RAP.

Parental and Resource Family Needs (PIP Item 17)

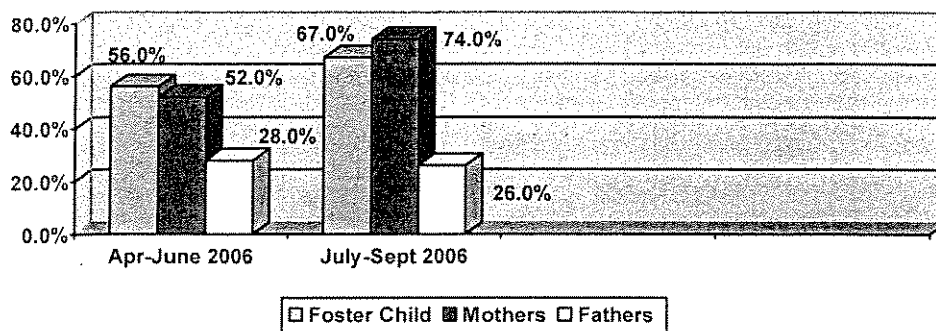
This item deals with the provision of services to parents and resources families for identified needs. The percentage 97.5% is excellent for April through June 2006 parents (mothers, fathers, resource families), but it is lower during the July through September 2006 quarter at 91.2%.



However, it is not clear if all actual needs have been initially identified, assessed, and documented by the county staff. It appears that initial assessments are made without full knowledge of the parents' and resource families' needs, and additional needs are identified, often through working with the families rather than through a formalized assessment, as the case moves through the various stages to achieve permanency. Some services identified for parents are drug screening and treatment, parenting classes, mental health counseling, family preservation program, anger management, assistance with transportation, employment and housing referrals, homemaker program, the Intercept Program, and assistance with food and utilities. For foster parents, which could include relative placement providers and adoptive parents, the services include assistance with transportation needs and medical needs, WIC, Medicaid, assistance with psychological evaluation and SSI application for the foster child, Project RUN, emotional and financial support for relatives, respite/sitter for the child while in the hospital, assistance with clothing for children, assistance for relative placements to become a licensed foster home or day care.

Involvement in Case Planning Activities (PIP Items 18/25)

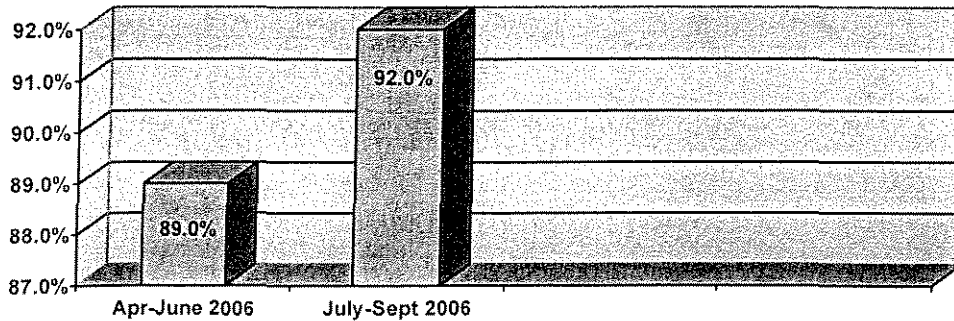
Involvement in case planning activities for the foster child and the parents shows some improvement. For the child the percentages rose from 56.0% for April through June 2006 to 67.0% for July through September. The average for July 2005 to June 2006 was 67.0%. Some of the past quarter's increase may be attributable to the increased efforts to include foster teens in their case planning through the Independent Living Program. April through June 2006 found that 52.0% of the mothers were involved in their case planning; for July through September 2006, the percentage increased to 74.0%. The average for July 2005 to June 2006 was 41.0%. This increase may be attributable to the Family Centered Practice training and the implementation of family team meetings. For the fathers, April through June 2006 had a percentage of 28.0%, with a lower number for July through September 2006 of 26.0%. The annual percentage for fathers was 24.0% for July 2005 through June 2006.



It appears the fathers are still not as involved in case planning and activities which might result from the agency's not actively pursuing fathers, their input, or their relatives' participation. There remain, on the other hand, many fathers who have stated interest in the child but refuse to make any follow-through with that statement or who have indicated their lack of interest in the child or his care. There are those fathers who are given the opportunity to enter into a case plan but refuse to agree to work through a service plan or to provide any emotional support or attachment opportunity for the child.

Monthly Worker-Child Contacts (PIP Item 19)

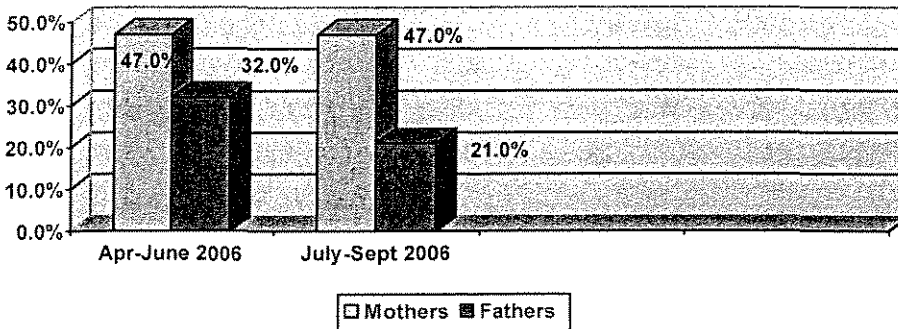
Monthly contacts by the case worker appear to have improved. For April through June 2006, face to face contacts between the child and case worker were 89.0%; for July through September, that rose to 92.0%.



This increase may be attributable to the constant and on-going monitoring by Foster Care Review as well as the MACWIS reports of these contacts that are provided at Senior Management meetings. These contacts have been a significant focus of the agency over the past year.

Monthly Worker-Parent Contacts (PIP Item 20)

Monthly contacts with the mother have remained stable with 47.0% for both April through June and July through September 2006 which is an increase over the average percentage for June, 2005 to July 2006 of 44.0%. The cases reviewed include all permanent plans and are not just children for whom the plan is reunification. For fathers, April through June was 32.0% and for July to September was 21.0%; from July 2005 through June 2006 the average was 27.0%.



Again, it must be emphasized that not all fathers are known, that some known fathers are transient and unwilling to be involved with their children, and that some just don't keep the agency aware of their whereabouts. But it also appears that perhaps not all known fathers are being pursued by the agency for their involvement in the case and with their children.

Well-Being 2

Children Receive Appropriate Services to Meet Their Educational Needs

The CFSR findings cited that MDHS did not consistently address the educational needs of children in in-home cases where there was clear evidence that the child(ren) in the family had education-related needs. Stakeholders noted that when educational needs were not being met it was due primarily to large caseloads and/or a lack of effective collaboration between MDHS and local school systems.

Family Centered Practice

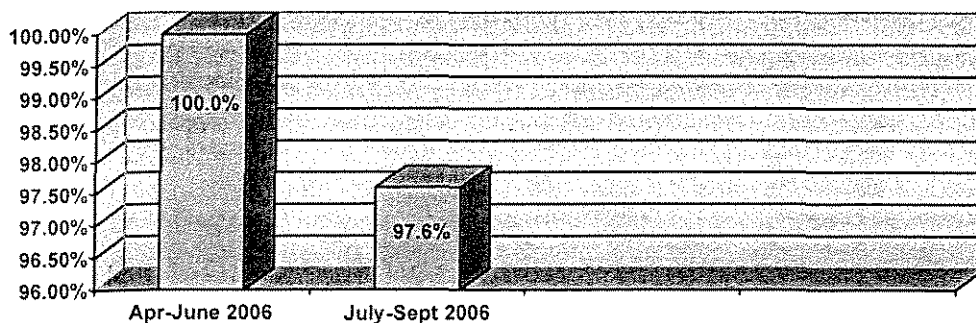
The FTM and CC provides an opportunity to assess educational needs and to identify needed and available services to address these needs. In addition, the CC includes community partners, and if a child has educational needs, representatives from education can become team members through the CC process.

Quality Assurance

The monthly FCCR reviews practice related to the assessment, the identification of educational needs and the services provided. In addition, the supervisory case review process will include the assessment of educational needs and the providing of services for children in-home and in custody.

Educational Needs (PIP Item 21)

Regarding services provided to meet children's educational needs, April through June 2006 saw that 100.0% of the identified educational needs were provided for the applicable children in the sample. Services listed were Independent Living skills classes, sign language instruction, tutoring services, speech therapy at school, IEP, financial aid to attend college classes, Project PRINTS, special services for specific learning disability, preschool day care services, and help in preparing for the ACT test. For July through September 2006 the percentage fell to 97.6%.



Out of the 42 children in the random sample with identified educational needs, only one did not have his needs met. This item is one that Foster Care Review is looking at more closely to attempt to ensure that children's educational needs are being met.

Well-Being 3

Children Receive Adequate Services to Meet Their Physical and Mental Health Needs

A key CFSR finding with regard to this outcome was that MDHS is not consistent in its efforts to meet children's physical or mental health needs. Identified concerns pertained to a lack of dentists who will accept Medicaid and a general lack of mental health services throughout the State.

Family Centered Practice

The FTM and the CC provide an opportunity to assess the physical health needs and identify needed and available services to address these needs. In addition, the CC includes community partners, and if the child has physical health needs, the health care providers can become team members through the CC process.

The FTM and the CC provide an opportunity to assess the mental health needs and to identify needed and available services to address these needs. In addition, the CC includes community partners, and if a child has mental health needs, the mental health care providers can become team members through the CC process.

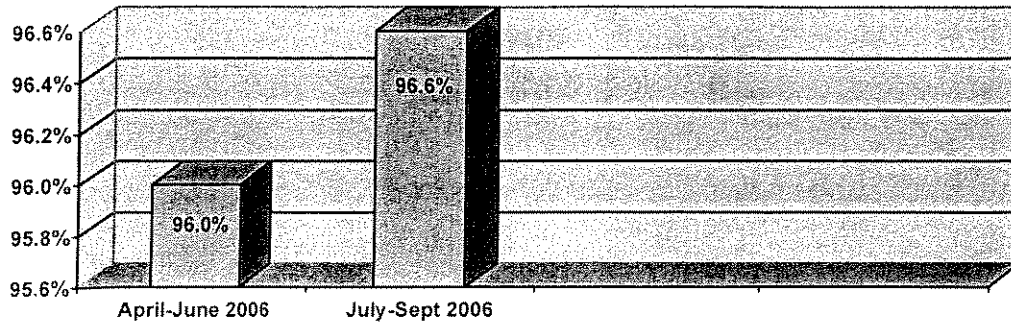
Quality Assurance

The monthly FCCR assesses practice related to the assessment, identification, and physical health services provided. The supervisory case review of in-home and custody cases will also assess the quality of practice in assessing physical health needs and the provision of services based on identified needs.

The monthly FCCR reviews practice related to the assessment, identification, and mental health services provided. The supervisory case review of in-home and custody cases will assess the practice of identification of mental health needs and the provision of services based on needs.

Physical Health Needs (PIP Item 22)

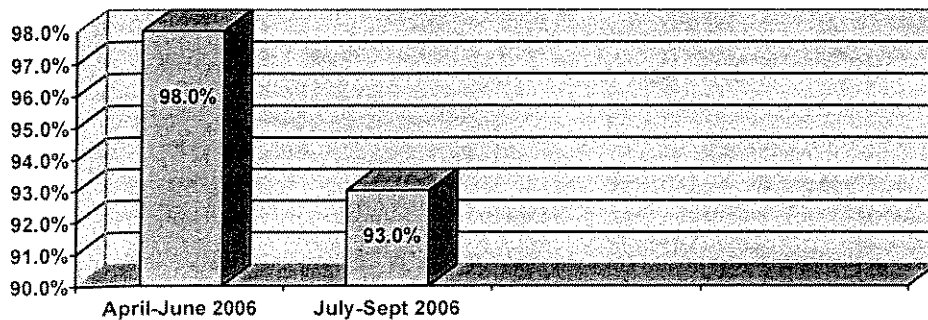
The identified physical health needs were provided in 96.0% of the children sampled for April through June 2006 and is 96.6% for July through September. The average for July 2005 to June 2006 was 94.0%.



Services listed were physical therapy, identification of sickle cell trait, treatment for acid reflux disease and heart problems, treatment for STDs, a helmet to aid in the shape of the child's head, high blood pressure medication, out-patient surgery, orthodontic care, physical therapy for developmental delays, and transportation to appointments.

Mental Health Needs (PIP Item 23)

The identified mental health needs were provided in 98.0% of the children for whom needs were identified in the sample for April through June 2006 and in 93.0% for July through September 2006. The average for July 2005 through June 2006 was 94.0%.



Services listed for the identified mental health needs were Youth Village Intercept Program, individual and group therapy, drug and alcohol treatment at The ARK, acute care or residential treatment, medication for bed-wetting, on-going mental health counseling.

Summary and Conclusions

The statewide training on Family Centered Practice, Family Team Meetings and the County Conference process that was completed in April 2006 appears to have enabled workers to improve in several areas related to working with the parents and providing appropriate services to families. However, it appears that the agency continues to need to work more diligently on involving the fathers and assuring that their needs are identified and met. The Foster Care Review Program will continue to monitor these items. The monthly issues report from the Foster Care Review Program will maintain emphasis on needed issues and provide continuing awareness of the items needing further implementation. While there may be some discussion of differing interpretations of

certain elements being evaluated, the discussion should heighten the region and the county awareness of the issues and their diligence in providing the needed services and actions toward safety, permanency and well-being for foster children.

Mississippi's Renegotiated Program Improvement Plan Progress Report**1st Quarterly Report: April-June 2006****and****2nd Quarterly Report: July-September 2006****SAFETY OUTCOME 1: CHILDREN ARE FIRST AND FOREMOST PROTECTED FROM ABUSE AND NEGLECT****Item 1-Timeliness of initiating investigations of reports of child maltreatment**

Goal: Increase the statewide percentage of intake investigations initiated within 24 hours from 67.99% to 71.99% by March 2008.

Goal Benchmark: Increase the statewide percentage of intake investigations initiated within 24 hours from 67.99 % to 69.99% by March 2007.

Baseline	Quarter 1 st April-June 2005	Quarter 2 nd July-September 2005	Quarter 3 rd October-December 2005	Quarter 4 th January-March 2006
67.99%	68.9%	72.4%	75.5%	78.1%
	Quarter 5 th April-June 2006	Quarter 6 th July-September 2006	Quarter 7 th October-December 2006	Quarter 8 th January-March 2007
	76.2%	79.4%		
	Quarter 9 th April-June 2007	Quarter 10 th July-September 2007	Quarter 11 th October-December 2007	Quarter 12 th January-March 2008

Progress toward Goal: The State has exceeded the established benchmark of 69.99% for intake investigations initiated within 24-hours for five consecutive quarters, and has exceeded our established goal of 71.99% for the same five consecutive quarters. The baseline of 67.99% for this goal was established based on two quarters - July-December 2004 - of the MACWIS "Child Investigation Timeliness Report: Statewide Summary." The quarterly data is based on the monthly MACWIS Child Investigation Timeliness Report. **(See Attachment PIP 1 – Timeliness of Investigations)**

Action Steps:

1a. Utilize technical assistance from the NCWRCCPS to provide recommendations for improvement to policy and practice for intake, screening and investigation response.

Status: Technical Assistance from the NCWRCCPS (Theresa Costello) has been utilized to help develop an intake screening tool and a risk and safety assessment tool. Initial contact with Theresa Costello occurred on January 14, 2005, and she has attended meetings of the Intake, Screening and Assessment Committee on February 3, 2005, April 5, 2005, April 6, 2005, May 9, 2005, July 19, 2005, August 22, 2005, May 19, 2006, and July 27, 2006. Theresa Costello also participated in a conference call on July 12, 2006.

(Mississippi requests that the projected completion date for Item 1a.4 be moved from September 2006 to November 2006).

Item	Benchmark	Projected Date	Date Completed	Attachment
1a.1	Request TA through ACF RO and coordinate TA with NRC	January 2005	January 2005	See Attachment 1a.1
1a.2	Initiate conference calls and develop plan for TA	March 2005	January 2005	See Attachment 1a.1
1a.3	Initiate on-site training and technical assistance at the CWTI Annual Conference	February 2005		
1a.4	Incorporate NRC and Policy and Practice Workgroup recommendations into policy and practice changes for intake, screening, and investigation response	September 2006 November 2006		

1b. Develop and implement Statewide training to insure consistency of intake, screening, and initiating investigations to ensure consistent practice across all regions and counties.

STATUS: Contracted with the University of Southern Mississippi to update Intensive Training Curricula.

(Mississippi requests that the projected completion date for Item 1b.1 be moved from September 2006 to November 2006).

(Mississippi also requests that the projected completion date for Item 1b.2 be moved from October 2006 to January 2007).

(Mississippi also requests that the projected completion date for Item 1b.3 be moved from December 2006 to March 2007).

(Mississippi also requests that the projected completion date for the evaluation portion of Item 1b.3 be moved from July 2007 to September 2007).

ITEM	BENCHMARK	PROJECTED DATE	DATE COMPLETED	ATTACHMENT
1b.1	Curricula, concise practice guide, and TOT materials developed by Training staff in collaboration with NRC and Policy and Practice Workgroup, and Providers.	September -2006 November 2006		
1b.2	Train the trainers completed.	October -2006 February 2007		
1b.3	Designated regional training staff will partner with RD to provide training to ASWS and county social work staff per region. Evaluation	December -2006 March 2007 July -2007 September 2007		
1b.4	Contract with University of Southern Mississippi to update Intensive training Curricula.	June 2006	May 2006	See Attachment 1b.4

1c. Develop and implement a system for RAP.

STATUS: The Regional Action Plan Practice Guide has been developed and distributed to Regional Directors. Training of Regional Directors and ASWS on how to develop Regional Action Plans has been completed. The County Self Assessments and the Workload Surveys have been completed and submitted for analysis and prioritizing. The Regional Summaries are in the process of being compiled and finalized. And will be distributed to Regional Directors by November 2006.

(Mississippi requests that the projected completion date for the regional summaries portion of Item 1c.3 be moved from September 2006 to November 2006).

ITEM	BENCHMARK	PROJECTED DATE	DATE COMPLETED	ATTACHMENT
1c.1	Process developed including RAP practice guide and requirements	May 2005	May 2005	See Attachment 1c.1
1c.2	Regional training and technical assistance on RAP Practice Guide to initiate county self assessment completed	February 2006	February 2006	See Attachment 1c.2
1c.3	County self assessments and workload surveys completed and submitted to RD for analysis and prioritizing	Submitted = June 2006 Regional Summaries Completed = September 2006 November 2006	July 2006	See Attachment 1c.3

1e. Utilize technical assistance from the NCWRCFPPP to provide recommendations for policy and practice changes related to FCP, FTM, and CC to improve family engagement in decision-making, assessment and case planning.

STATUS: NRC recommendations incorporated into policy and practice changes for FCP, FTM and CC.

ITEM	BENCHMARK	PROJECTED DATE	DATE COMPLETED	ATTACHMENT
1e.1	Request TA through ACF RO and coordinate TA with NRC	January 2005	January 2005	See Attachment 1e.1
1e.2	Initiate conference calls and develop plan for TA	March 2005	March 2005	See Attachment 1e.1
1e.3	Initiate on-site training and technical assistance at the CWTI Annual Conference	February 2005		
1e.4	Incorporate NRC recommendations into policy and practice changes for FCP, FTM, and family centered CC	Policy, Training Curricula and Practice Guides Completed = July 2005 FCP, FTM, CC Training Completed and Practice Guides Released = April 2006	August 2005 April 2006	See Attachment 1f.1 See Attachment 1e.4

1f. Provide statewide training and release the concise practice guide for FCP, FTM within 30 days and CC and implement.

Status: Train-the-trainers completed, statewide training completed and concise practice guides for FCP, FTM, and CC completed and distributed during statewide training. The University of Southern Mississippi has been contracted with to update Intensive Training Curricula.

ITEM	BENCHMARK	PROJECTED DATE	DATE COMPLETED	ATTACHMENT
1f.1	Training Curricula, TOT materials, Concise Practice Guide developed	July 2005	August 2005	See Attachment 1f.1
1f.2	Trainers trained	December 2005	December 2005	See Attachment 1f.2
1f.3	Training staff will partner with RD to drill down training to all ASWS and county social work staff per region	Statewide Training Completed = April 2006	April 2006	See Attachment 1e.4
1f.4	Contract with the University of Southern Mississippi to update intensive training curricula	June 2006	May 2006	See Attachment 1b.4

1h. Develop MACWIS Report based on "Family Team Meeting" narrative type to monitor the frequency of Family Team Meetings held within 30 days.

STATUS: MACWIS Report based on the "Family team Meeting" narrative type has been developed, and is available through the MACWIS Web..

ITEM	BENCHMARK	PROJECTED DATE	DATE COMPLETED	ATTACHMENT
1h.1	Develop MACWIS Report for ASWS and RD	July 2006	June 2006	See Attachment 1h.1

1i. Implement reporting system for the ASWS and RD to provide feedback about improvements on the timeliness of investigations and FTM based on MACWIS reports.

STATUS: The PIP Progress Improvement Forms will be used by ASWS and Regional Directors for monthly and quarterly reporting. Forms have been developed as part of the RAP – a monthly ASWS reporting form and an RD quarterly reporting form. The Regional Directors and the County Supervisors have been trained on the Regional Action Plan process and how to use the monthly and quarterly reporting forms.

ITEM	BENCHMARK	PROJECTED DATE	DATE COMPLETED	ATTACHMENT
1i.1	Develop ASWS Monthly and RD Quarterly Progress Improvement Reports	May 2005	May 2005	See Attachment 1i.1
1i.2	Train RD and ASWS on reporting	February 2006	February 2006	See Attachment 1c.2

1j. Restructure and implement the supervisory case review to include the assessment of practice on one in-home case per worker every 90 days.

Status: The Supervisory Administrative Review form has been revised to include both in-home and custody case information, and the narrative type "Supervisory Administrative Review" has been added to the MACWIS drop down list.

(Mississippi requests that the projected completion date for Item 1j.2 be moved from July 2006 to June 2007).

(Mississippi also requests that the projected completion date for Item 1j.4 be moved from August 2006 to December 2006).

(Mississippi also requests that the projected completion date for Item 1j.6 be moved from October 2006 to May 2007).

ITEM	BENCHMARK	PROJECTED DATE	DATE COMPLETED	ATTACHMENT
1j.1	Narrative type added to MACWIS to include "Supervisory Administrative Review"	July 2005	May 2005	See Attachment 1j.1
1j.2	Develop MACWIS report to pull case review data pertaining to "Supervisory Administrative Review" type report	July -2006 June 2007		
1j.3	Supervisory Review Committee to revise MDHS-SS-408 Supervisory Administrative Review form to include in-home case information to be integrated into MACWIS	August 2005	August 2005	See Attachment 1j.3
1j.4	MACWIS System Requirements Document completed and shared with Supervisory Review Committee	August -2006 December 2006		
1j.6	MACWIS System requirements Documents designed, developed and tested for implementation in MACWIS.	October -2006 May 2007		

1k. Improve collaboration with MS Band of Choctaws Social Services on coordination of protective service cases related to children of Choctaw families who are not covered or eligible for services through the MS band of Choctaws or Choctaw Social Services.

STATUS: The collaboration meeting with the MS Band of Choctaw Social Services was initiated in August 2006, and one additional meeting was held (also in August 2006) since that initial meeting.

ITEM	BENCHMARK	PROJECTED DATE	DATE COMPLETED	ATTACHMENT
1k.1	Meeting initiated between Regional Directors for Regions 3 and 4, and ASWS for Neshoba County and adjoining counties and Choctaw Social Services	July 2006	August 2006	See Attachment 1K.1

1L. Conduct a needs assessment in Harrison, Hancock and Jackson counties.

STATUS: Needs Assessment completed for Harrison, Hancock and Jackson Counties.

ITEM	BENCHMARK	PROJECTED DATE	DATE COMPLETED	ATTACHMENTS
1L.1	Request assistance of appropriate NCWRCs to assist with needs assessment	March 2006	March 2006	See Attachment 1L.1
1L.2	Conduct initial planning meeting with NCWRCs	April 2006	April 2006	See Attachment 1L.2
1L.3	Utilize MACWIS Reports to review data and compare to area and state prior to Hurricane Katrina	May 2006	May 2006	See Attachment 1L.3
1L.4	Utilize the T/A of the NCWROCI, NCWRCCP, and the NCRC on Data and Technology in conjunction with the Mississippi Children's Home Society to conduct a stakeholders meeting of both internal and external stakeholders to evaluate the current status of the affected coastal counties	June 2006	May 2006	See Attachment 1L.4
1L.5	Develop a formalized needs assessment	July 2006	July 2006	See Attachment 1L.5

1m. Development of a Coastal Recovery Plan.

STATUS: Recommendations for a Coastal Recovery Plan developed and submitted to the DFCS State Office.

ITEM	BENCHMARK	PROJECTED DATE	DATE COMPLETED	ATTACHMENT
1m.1	Recommendations for a Coastal Recovery Plan submitted by the National Child Resource Center	September 2006	October 2006	See Attachment 1m.1

1n. Coordinate temporary workers to assist with post Katrina needs, including previous backlog of cases exacerbated by Hurricane Katrina.

STATUS: A Request for Proposals (RFP) was advertised for a service provider to assist with the hiring of temporary workers, primarily for the areas devastated by Hurricane Katrina, proposals were submitted and Social Worker p.r.n. was contracted with to provide needed temporary workers. At present, a total of six temporary workers have been hired and have completed training. These workers have been assigned to the following counties: Jackson County (one worker), Harrison County (one worker), Forrest County (three workers), and Pearl River County (one worker).

ITEM	BENCHMARK	PROJECTED DATE	DATE COMPLETED	ATTACHMENTS
1n.1	Advertise Request for Proposals (RFP) for service provider to assist with the hiring of temporary workers	June 2006	April 2006	See Attachment 1n.1
1n.2	Review submitted proposals	July 2006	July 2006	See Attachment 1n.2
1n.3	Executions of proposals	August 2006	August 2006	See Attachment 1n.3

10. Harrison County will reassess its current system for responding to/initiating reports of abuse/neglect within 24-hours.

STATUS: A meeting was held in July 2006 and this issue was discussed.

ITEM	BENCHMARK	PROJECTED DATE	DATE COMPLETED	ATTACHMENTS
10.1	ASWS will meet to develop an alternative system/process for improving response time for investigations	May 2006	July 2006	See Attachment 10.1

SAFETY OUTCOME 2: CHILDREN ARE SAFELY MAINTAINED IN THEIR HOMES WHENEVER POSSIBLE AND APPROPRIATE

Item 3- Services to family to protect children in-home and prevent removal

Goal: Ensure maximum benefits for in-home services for families and children receiving Family Preservation services to maintain children in their homes and prevent removal.

Benchmark Goal: Revise Family Preservation policy and procedures, identify service areas in state, and develop referral process and required forms.

Quarter	Timeframe	Measurement of Progress
1 st	April-June 2006	Revise Family Preservation policy and procedures
2 nd	July-September 2006	Identify service areas in the state
3 rd	October-December 2006	Develop referral process and required forms
4 th	January-March 2007	

Progress toward Goal: Recommendations from the Policy & Practice Workgroup have been incorporated into Family Preservation Policy, Family Preservation policy has been revised, a new RFP has been written and is expected to be issued and advertised by October 31, 2006. The deadline for submissions is November 30, 2006.

Action Steps:

3a. Maximize the utilization of family preservation staff and services for families to protect children in-home and prevent removal when possible.

Status: Recommendations from the Policy and Practice Workgroup have been incorporated into policy for Family Preservation. A new RFP has been written and is expected to be issued and advertised by October 31, 2006, with a deadline for submissions of November 30, 2006. The contract date is estimated to start February 1, 2007 and run until September 30, 2007.

(Mississippi requests that the projected completion date for Item 3a.1 be changed from July 2006 to February 2007).

ITEM	BENCHMARK	PROJECTED DATE	DATE COMPLETED	ATTACHMENT
3a.1	Develop a referral process to ensure appropriate families utilize services	July -2006 January 2007		
3a.2	Incorporate Policy and Practice Workgroup recommendations into policy and practice changes for Family Preservation	June 2006	June 2006	See Attachment 3a.2

3b. Provide Statewide training and release the concise practice guide for FCP, FTM, within 30 days and CC to implement FCP changes.

Status: Train-the-trainers completed, statewide training completed and concise practice guides for FCP, FTM, and CC completed and distributed during statewide training. Contracted with the University of Southern Mississippi to update the Intensive Training Curricula.

ITEM	BENCHMARK	PROJECTED DATE	DATE COMPLETED	ATTACHMENT
3b.1	Training Curricula, TOT Materials, Concise Practice Guides developed	July 2005	August 2005	See Attachment 1f.1
3b.2	Trainers trained	December 2005	December 2005	See Attachment 1f.2
3b.3	Training staff and RD partner to provide drill down training to all ASWS and county social work staff per region	Statewide Training Completed = April 2006	April 2006	See Attachment 1e.4
3b.4	Contract with University of Southern Mississippi to update intensive training curricula	June 2006	May 2006	See Attachment 1f.4

3c. Re-structure and implement the supervisory case review to include the assessment of practice on one in-home case per worker every 90 days.

Status: The Supervisory Administrative Review form has been completed for both in-home and custody cases, the narrative type "Supervisory Administrative Review" has been added to the MACWIS drop down list.

(Mississippi requests that the projected completion dates for Item 3c.2 be moved from July 2006 to June 2007).

(Mississippi also requests that the projected completion date for Item 3c.4 be moved from August 2006 to December 2006).

(Mississippi also requests that the projected completion date for Item 3c.6 be moved from October 2006 to May 2007).

ITEM	BENCHMARK	PROJECTED DATE	DATE COMPLETED	ATTACHMENT
3c.1	Narrative type added to MACWIS to include "Supervisory Administrative Review"	July 2005	May 2005	See Attachment 1j.1
3c.2	Develop MACWIS report to pull case review data pertaining to "Supervisory Administrative Review" type report	July -2006 June 2007		
3c.3	Supervisory Review Committee to revise MDHS-SS-408 Supervisory Administrative Review form to include in-home case information to be integrated into MACWIS	August 2005	August 2005	See Attachment 1j.3
3c.4	MACWIS System Requirements Document completed and shared with Supervisory Review Committee	August -2006 December 2006		
3c.6	MACWIS System requirements Documents designed, developed and tested for implementation in MACWIS	October -2006 May 2007		

3e. Conduct a needs assessment in Harrison, Hancock and Jackson counties.

STATUS: The needs assessment for Harrison, Hancock and Jackson counties has been completed.

ITEM	BENCHMARK	PROJECTED DATE	DATE COMPLETED	ATTACHMENTS
3e.1	Request assistance of appropriate NCWRCs to assist with needs assessment	March 2006	March 2006	See Attachment 1L.1
3e.2	Conduct initial planning meeting with NCWRCs	April 2006	April 2006	See Attachment 1L.2
3e.3	Utilize MACWIS reports to review data and compare to area and state prior to Hurricane Katrina	May 2006	May 2006	See Attachment 1L.3
3e.4	Utilize the T/A of the NCWROCI, NCWRCCPP, and the NCRC on data and technology in conjunction with the Mississippi Children's Home Society to conduct a stakeholders meeting of both internal and external stakeholders to evaluate the current status of the affected coastal counties	June 2006	May 2006	See Attachment 1L.4
3e.5	Develop a formalized needs assessment	July 2006	July 2006	See Attachment 1L.5

3f. The development of a Coastal Recovery Plan.

STATUS: Recommendations have been developed and submitted to the DFCS State Office.

ITEM	BENCHMARK	PROJECTED DATE	DATE COMPLETED	ATTACHMENT
3f.1	Recommendations for a Coastal Recovery Plan submitted by the National Child Resource Center	September 2006	October 2006	See Attachment 1m.1

3g. Hancock County will assess current community resources to assist in identifying areas of concern and the programs available for families at risk.

STATUS: The programs and community resources that are operating and providing services in Hancock County have been identified.

ITEM	BENCHMARK	PROJECTED DATE	DATE COMPLETED	ATTACHMENTS
3g.1	Identify programs and community resources that are operating and providing services	June 2006	June 2006	See Attachment 3g.1
3g.2	Coordinate meeting to review existing services available for families	July 2006	October 2006	See Attachment 3g.1
3g.3	Partner with Coastal community resources to explore alternate solutions for safety concerns, such as schools and/or after school programs purchasing washers/dryers to wash clothes in lieu of reporting children who are living in FEMA trailers who appear to be unkempt or dirty	September 2006	October 2006	See Attachment 3g.1

Item 4- Risk of harm to child

Goal: Reduce risk of harm for children and families by implementing a revised safety and risk assessment to support worker decisions related to risk status by March 2008.

Benchmark Goal: Complete the development of the safety and risk assessment tools, the safety and risk assessment practice guide, and the related training curricula by March 2007.

Quarter	Timeframe	Measurement of Progress
1 st	April-June 2006	Safety and Risk Assessment tools developed
2 nd	July – September 2006	Safety and Risk Assessment practice guides completed
3 rd	October-December 2006	Related training materials completed
4 th	January – March 2007	

Progress toward Goal: The Safety Assessment tool has been completed.

Action Steps:

4a. Utilize technical assistance from the NCWRCCPS and NCWRFCPPP to provide recommendations for improvement to safety and risk assessment policy, practice and assessment tools.

STATUS: Technical assistance is being utilized in the improvements to the safety and risk assessment policy, practice guides and assessment tools.

(Mississippi requests that the projected completion date for Item 4a.1 be moved from September 2006 to November 2006).

ITEM	BENCHMARK	PROJECTED DATE	DATE COMPLETED	ATTACHMENT
4a.1	Incorporate NRC and Workgroup recommendations into policy and practice for safety and risk assessment	September -2006 November 2006		

4b. Develop and implement on-going specialized training maximizing the CWTI in the areas of substance abuse, domestic violence, and mental illness to improve staff skills to identify and assess risk of harm.

STATUS: Training completed, and training evaluation report completed.

ITEM	BENCHMARK	PROJECTED DATE	DATE COMPLETED	ATTACHMENT
4b.1	CWTI will implement through regionally based universities locally accessible training sessions	June 2005	June 2005	See Attachment 4b.1
4b.2	CWTI will conduct an evaluation per training & provide summary report to Training Unit	July 2005	July 2005	See Attachment 4b.2

4d. Utilize technical assistance from the NCWRCFCPPP to provide recommendations for policy and practice changes related to FCP, FTM, and the family centered CC to improve family engagement in case planning.

Status: Train-the-Trainers training completed, statewide training completed and concise practice guides for FCP, FTM, and CC completed and distributed during statewide training.

ITEM	BENCHMARK	PROJECTED DATE	DATE COMPLETED	ATTACHMENT
4d.1	Incorporate NRC recommendations into policy and practice changes for FCP, FTM, and Family centered CC	July 2005	August 2005	See Attachment 1f.1
4d.2	Implement practice and policy changes through statewide training on FCP, FTM and CC	April 2006	April 2006	See Attachment 1e.4

4f. Conduct a needs assessment in Harrison, Hancock and Jackson Counties.

STATUS: The needs assessment completed for Harrison, Hancock and Jackson counties.

ITEM	BENCHMARK	PROJECTED DATE	DATE COMPLETED	ATTACHMENTS
4f.1	Request assistance of appropriate NCWRCs to assist with needs assessment	March 2006	March 2006	See Attachment 1L.1
4f.2	Conduct initial planning meeting with NCWRCs	April 2006	April 2006	See Attachment 1L.2
4f.3	Utilize MACWIS Reports to review data and compare to area and state prior to Hurricane Katrina	May 2006	May 2006	See Attachment 1L.3
4f.4	Utilize the T/A of the NCWROCI, NCWRCCPP, and the NCRC on Data and technology in conjunction with the Mississippi Children's Home Society to conduct a stakeholders meeting of both internal and external stakeholders to evaluate the current status of the affected coastal counties	June 2006	May 2006	See Attachment 1L.4
4f.5	Develop a formalized needs assessment	July 2006	July 2006	See Attachment 1L.5

4g. The development of a Coastal Recovery Plan.

STATUS: Recommendations developed and submitted to the DFCS State Office.

ITEM	BENCHMARK	PROJECTED DATE	DATE COMPLETED	ATTACHMENTS
4g.1	Recommendations for a Coastal Recovery Plan submitted by the national Child Resource Center.	September 2006	October 2006	See Attachment 1m.1

PERMANENCY OUTCOME 1: CHILDREN HAVE PERMANENCY AND STABILITY IN THEIR LIVING SITUATION

Item 6: Stability of foster care placement

Goal: Increase the statewide percentage of children in foster care 12 months or less from the time of the latest removal from home, who experience no more than 2 placement settings from 78.8% to 80.7% by March 2008.

Goal Benchmark: Increase the statewide percentage of children in foster care 12 months or less from the time of the latest removal from home, who experience no more than 2 placement settings from 78.8% to 79.7% by March 2007.

Baseline	Quarter 1 st April-June 05	Quarter 2 nd July- Sept. 05	Quarter 3 rd Oct.- Dec. 05	Quarter 4 th Jan.-March 06
78.8%	80.3%			

Progress toward Goal: Exceeded goal based on 1st quarter results.

Action Steps:

6a. Ensure all children in custody have correct placement entries in MACWIS to improve the validity of data and reports to monitor placement stability.

STATUS: The MACWIS Missing Placement Report to help monitor placement stability has been completed.

ITEM	BENCHMARK	PROJECTED DATE	DATE COMPLETED	ATTACHMENT
6a.1	All children in custody have a current placement entered in MACWIS	May 2005	May 2005	See Attachment 6a.1

6b. Utilize T/TA from the Adopt US Kids to assist in the development and implementation of a targeted Statewide Recruitment and Retention Plan for foster and adoptive families and to train trainers (resource families paired with staff) on the "Answering the Call" curricula to improve the response to potential foster and adoptive parent inquiries.

Status: Utilizing TA the Statewide Recruitment and Retention Plan has been developed. Trainers (resource families paired with staff) have been trained on the "Answering the Call" curricula.

ITEM	BENCHMARK	PROJECTED DATE	DATE COMPLETED	ATTACHMENT
6b.1	Request technical assistance from Adopt US Kids	January 2005	January 2005	See Attachment 6c.1
6b.2	Licensure and adoption establish a committee to coordinate training and technical assistance with NRC	February 2005	February 2005	See Attachment 6c.2
6b.3	T/TA provided to develop Statewide Recruitment and Retention Plan	July 2005	June 2005	See Attachment 6c.3
6b.4	Train the Trainers for "Responding to the Call" pairing a resource parent with Licensure or Adoption Staff to provide training regionally.	August 2006	June 2006	See Attachment 6b.4

6e. NCWRCSNA to assist with enhancing foster and adoptive parent training curricula to include foster and adoptive parents roles as team members.

STATUS: The PATHS Curriculum has been revised and distributed. Technical Assistance was utilized in the revising of the PATHS curriculum.

ITEM	BENCHMARK	PROJECTED DATE	DATE COMPLETED	ATTACHMENTS
6e.1	T/TA to review and enhance PATHS curriculum based on dual certification and foster/adopt families role as team members with DFCS and working with birth families.	August 2006	September 2006	See Attachment 6e.1

6g. Coordinate with IV-E CWTI to develop & implement on-going training for foster & adoptive parents in specialized areas to improve capacity to handle children's behavior & prevent unplanned placement moves or disruptions

STATUS: Training has been developed and implemented. Training has been completed, and evaluation results done.

ITEM	BENCHMARK	PROJECTED DATE	DATE COMPLETED	ATTACHMENT
6g.1	CWTI will implement through regionally based universities to provide locally accessible training sessions	June 2005	June 2005	See Attachments 4b.1 & 6g.1
6g.2	CWTI will conduct training evaluations after each session and provide evaluation results to SO	July 2005	July 2005	See Attachments 6g.1 & 4b.2

6h. Clarify regional procedures and criteria related to the RD review and approval for extensions beyond 45 days.

STATUS: Procedures clarified for ASWS and RD to approve shelter extensions beyond 45 days.

ITEM	BENCHMARK	PROJECTED DATE	DATE COMPLETED	ATTACHMENT
6h.1	Regional Directors document procedures and criteria for approval for shelter extensions beyond 45 days and submit to DFCS Division Director for Senior Management Meeting	July 2005	July 2005	See Attachment 6h.1
6h.2	Senior Management will agree on procedures and criteria for extension approvals	September 2005	July 2005	See Attachment 6h.1

6i. Track use of shelter placements and develop regional procedures to reduce the inappropriate use of shelter placements and the length of stay in shelters.

STATUS: MACWIS Shelter Report developed

ITEM	BENCHMARK	PROJECTED DATE	DATE COMPLETED	ATTACHMENT
6i.1	Develop and implement MACWIS Shelter Report	Developed = March 2005 Implemented = May 2005	Developed = March 2005 Implemented = May 2005	See Attachment 6i.1
6i.2	RD and ASWS will monitor, track and review use of shelter placements and extensions monthly at staff meetings	Implemented = May 2005	Implemented = May 2005	See Attachment 6i.2

6j. Conduct a needs assessment in Harrison, Hancock and Jackson counties.

STATUS: Needs assessment completed for Harrison, Hancock and Jackson Counties.

ITEM	BENCHMARK	PROJECTED DATE	DATE COMPLETED	ATTACHMENTS
6j.1	Request assistance of appropriate NCWRCs to assist with needs assessment	March 2006	March 2006	See Attachment 1L.1
6j.2	Conduct initial planning meeting with NCWRCs	April 2006	April 2006	See Attachment 1L.2
6j.3	Utilize MACWIS Reports to review data and compare to area and state prior to Hurricane Katrina	May 2006	May 2006	See Attachment 1L.3
6j.4	Utilize the T/TA of the NCWROCI, NCWRCCPP, and the NCRC on data and technology in conjunction with the Mississippi Children's Home Society to conduct a stakeholders meeting of both internal and external stakeholders to evaluate the current status of the affected coastal counties	June 2006	May 2006	See Attachment 1L.4
6j.5	Develop a formalized needs assessment.	July 2006	July 2006	See Attachment 1L.5

6k. The development of a Coastal Recovery Plan.

STATUS: Recommendations developed and submitted to the DFCS State Office.

ITEM	BENCHMARK	PROJECTED DATE	DATE COMPLETED	ATTACHMENTS
6k.1	Recommendations for a Coastal Recovery Plan submitted by the National Child Resource Center.	September 2006	October 2006	See Attachment 1m.1

6m. DFCS staff will reassess the policy and procedures regarding the physical requirements for children placed in foster care.

STATUS: Alternative policies and/or procedures for children in foster care have been made regarding the physical requirements for children placed in foster care in Harrison, Hancock and Jackson Counties.

(Mississippi requests that the projected completion date for Item 6m.1 be moved from June 2006 to November 2006).

ITEM	BENCHMARK	PROJECTED DATE	DATE COMPLETED	ATTACHMENTS
6m.1	DFCS staff will review relevant state and federal guidelines regarding the physical requirements for children in foster care	June 2006 November 2006		
6m.2	Recommendations will be made for alternate policies and/or requirements for Harrison, Hancock and Jackson Counties for children in foster care, such as allowing young siblings to share a bedroom, and children of the same gender sharing a bedroom.	July 2006	September 2006	See Attachment 6m.2

Item 7: Permanency goal for child

Goal: Improve the percentage of children in foster care who have an appropriate permanent plan based on the case information from **89.6% to 91.0%** by March 2008.

Goal Benchmark: Improve the percentage of children in foster care who have an appropriate permanent plan based on the case information from **89.6% to 90.3%** by March 2007.

Baseline	Quarter 1 st April-June 06	Quarter 2 nd July- Sept. 06	Quarter 3 rd Oct.- Dec. 06	Quarter 4 th Jan.-March 07
89.6%	94.4%	88.9%		
	Quarter 5 th April-June 07	Quarter 6 th July- Sept. 07	Quarter 7 th Oct.- Dec. 07	Quarter 8 th Jan.-March 08

Progress toward Goal: Four quarters of data has been collected beginning with the July-September 2005 quarter and ending with the April-June 2006 quarter. The 3 Coastal Counties were not included in the data collected during this time period. A proposed baseline of 89.6% has been established, and proposed percentages of improvement have also been set for the benchmark and the goal. Mississippi exceeded both the proposed benchmark and the goal in the first quarter (April-June 2006), but fell short of the benchmark and the goal in the second quarter (July-September 2006), falling below the proposed baseline. (See Attachment PIP Item 7: Baseline and Percentages of Improvement)

Action Steps:

7c. Enhance the CC (six month administrative periodic review) to be more family centered.

Status: Forms, procedures and policy have been reviewed and revised to be more consistent with family centered practice, practice guides for CC staff and families have been developed, and the changes in CC practice have been implemented.

ITEM	BENCHMARK	PROJECTED DATE	DATE COMPLETED	ATTACHMENT
7c.1	Review and revise forms, procedures, and policy to be more consistent with family centered practice	July 2005	July 2005	See Attachment 13b.2
7c.2	Develop Practice Guide for CC for staff and families	July 2005	July 2005	See Attachment 13b.2
7c.3	Implement changes in CC practice	October 2005	October 2005	See Attachment 8d.1

7e. Identify conferences and training opportunities for Judges and court personnel for DFCS to provide presentations, training opportunities, and to develop collaborative relationships.

STATUS: Conferences and/or training opportunities determined.

ITEM	BENCHMARK	PROJECTED DATE	DATE COMPLETED	ATTACHMENT
7e.1	Coordinate with CIP project to identify the five annual GAL seminar trainings, Prosecutor trainings, Youth Court and Referee trainings, the Trial Appellate Judges Conference for possible time on agendas for presentations, trainings and or to participate	May 2006	May 2006	See Attachment 7e.1
7e.2	Develop presentations and materials based on agenda and commitments	April 2006	April 2006	See Attachment 7e.1
7e.3	Utilize NRC for Legal and Judicial to assist with T/TA in developing presentations for judges and court personnel at conferences.	September 2006	September 2006	See Attachment 7e.1

7f. Collaborate with CIP and AOC to develop and distribute monthly reports for county youth court judges that will improve the consistency of periodic review of the status of each child.

STATUS: The Title IV-E Permanency Hearing Report has been developed and implemented.

Permanency Hearing Reports are sent directly to Youth Court Judges on a monthly basis. Permanency Hearing Reports were distributed starting in June 2006, in July 2006 and then again in August in 2006. The September 2006 Permanency Hearing Report was not mailed out due to feedback from the Youth Court Judges to make the report more useful. The report was changed, based on the suggestions by the judges. In September, the new sample Permanency Hearing Report was distributed to the Referees and County Court Judges at their annual conference. The September report was not mailed out because errors were found after the changes were made. The report has been corrected and distribution will resume during the month of October. It will be mailed to all Referees and County Court Judges.

ITEM	BENCHMARK	PROJECTED DATE	DATE COMPLETED	ATTACHMENT
7f.1	Develop Title IV-E Permanency Hearing reports by County to provide to youth court judges to make them aware of need for Permanency Hearings	Developed and Implemented = June 2006	June 2006	See Attachment 7f.1
7f.2	Copies of Permanency Hearing Reports sent directly to Youth Court Judges by DFCS SO	June 2006 and then monthly July 2006 August 2006 September 2006	June 2006 July 2006 August 2006 September 2006	See Attachment 7f.2
7f.3	Quarterly meetings between DFCS and the Chief Justice will be held to address reports, court responses and other court and agency issues impacting timely permanency	Initiated = May 2006 and then quarterly	May 2006	See Attachment 7f.3

7g. Develop and submit articles related to child welfare practice for publications utilized by court personnel.

STATUS:

(Mississippi requests that the projected completion date for Item 7g.1 be moved from July 2006 to November 2006).

(Mississippi requests that the projected completion date for Item 7g.2 be moved from July 2006 to November 2006).

ITEM	BENCHMARK	PROJECTED DATE	DATE COMPLETED	ATTACHMENTS
7g.1	Coordinate with AOC to prepare and submit articles for publication in the Quarterly Newsletter to the Judges.	July 2006 November 2006		
7g.2	Coordinate with the Young Lawyers Division, Child Advocacy Division to explore ways to submit articles for publication in the Bar Association Journal.	July 2006 November 2006		